

that is shared and mourned by our entire country, definitely in this Congress of the United States, and across the world. Whatever is in our power to be helpful to them, we will do—and we will do it quickly. Most importantly, they will always and ever be in our prayers.

GIVE US THEIR NAMES

The SPEAKER pro tempore. The Chair recognizes the gentleman from California (Mr. MCCLINTOCK) for 5 minutes.

Mr. MCCLINTOCK. Mr. Speaker, one of the most disturbing aspects of the unfolding scandal involving the misuse of the IRS is what can only be described as an insatiable appetite for names, names, and more names.

Conservative groups—and only conservative groups—seeking to organize under section 501 were subjected to pages of intrusive and irrelevant questions but with a common theme: give us their names. Give us the names of your volunteers. Give us the names of your donors and your family members and your business associates. Give us the names of speakers and audience participants in your meetings.

One man applying to form a group to educate teenagers in constitutional principles was told to turn over the names of his students. As he told a reporter, Can you imagine my responsibility to parents if I disclosed the names of their children to the IRS?

This tactic was not limited to new applications. The venerable Leadership Institute, which has been schooling young people in constitutional principles for 40 years, was put through a year-long audit. The IRS wasn't only interested in financial information, they wanted the names of the students and their college interns and the names of anyone who had subsequently hired these young people. And when the IRS wasn't demanding the names of ordinary Americans or asking what they were reading or thinking or saying, in some cases applicants were given names and told to reveal what they knew about these people.

Mr. Speaker, these are facts that are undisputed by the administration and its apologists. For a period of more than 2 years, these questions were put to Americans whose political opinions had been singled out by one of the most powerful and feared agencies of the Federal Government.

What I would like to know is why? Why did the IRS demand lists of names of thousands of Americans whose only common characteristic is that they disagreed with this administration? Where are these lists now? With whom were they shared? Who wanted to know these names? What possible use would the IRS have to track the names of high school students who simply wanted to learn about their Constitution? But most importantly, what were these names used for and what are they being used for?

I don't have an answer to these questions, but I find their implications deeply disturbing; and they must be answered during the course of the investigations now underway, and they must be answered in full and with certainty.

□ 1030

I cannot conceive of the reasons why the Federal Government would be so interested in compiling such lists; but we know for a fact that they were, and that fact is undisputed. What we don't know is why; and knowing the answer to that question and the other questions raised by this undisputed fact is absolutely essential to a society that values its freedom of speech, its freedom of assembly, its freedom of press, and its freedom of conscience.

We know the ancillary effect of these illegal demands. They dried up donations to these conservative groups. They heavily suppressed volunteer activities. We know some lists were leaked to liberal publications like The Huffington Post and ProPublica. What we don't know is what was the direct purpose of gathering these names.

The administration's spokesman this weekend said the law is irrelevant and called it a distraction. Well, on the contrary, this strikes at the very foundation of a free society, the rule of law, and the right of the people to question the policies of their government without fear of retribution or intimidation.

Seventy-five years ago, Winston Churchill warned of a "state of society where men may not speak their minds, where children denounced their parents to the police, where a businessman or small shopkeeper ruins his competitor by telling tales about his private opinions."

If it is possible that we have taken even a single step down the road that leads to such places, then that situation should occupy our full and undistracted attention until it is fully and completely rectified, new safeguards are erected against its recurrence, and those responsible are held fully accountable.

MAXIMIZING OPTIMAL MATERNITY SERVICES FOR THE 21ST CENTURY ACT

The SPEAKER pro tempore. The Chair recognizes the gentlewoman from California (Ms. ROYBAL-ALLARD) for 5 minutes.

Ms. ROYBAL-ALLARD. Mr. Speaker, I rise to challenge my colleagues to make optimal maternity outcomes a priority in our country.

Tragically, childbirth in this wealthiest of nations has significantly greater risks for mothers and babies when compared to almost all other developed nations.

In the U.S., more than two women die every day from pregnancy-related causes, and more than one-third of all women who give birth experience some type of complication with an adverse

effect on their health. These tragedies are most often found in communities of color.

Regrettably, mothers aren't the only victims of our maternity care system. Sadly, out of every 1,000 babies born in the United States, nearly seven babies die. Particularly disturbing is that since 1991, premature birth—the leading cause of low birth rate and infant mortality—has actually increased in our country by more than 30 percent. Adding to this concern is that the U.S. spends more than double of any country in the world on maternity care and still ranks far behind most developed countries in maternal and infant outcomes. Clearly, something must be done to protect mothers and babies.

While it is important to continue studying the causes, we already know many factors that contribute to poor birth outcomes and to high costs. One well-established factor is that current U.S. medical practice does not follow the vast body of research that exists on the best evidence-based maternity care. This includes the research of credible studies showing that multiple noninvasive maternity practices can produce considerable improvement in birth outcomes without detrimental side effects to mother or baby.

Two examples of these noninvasive and relatively simple practices significantly underused during pregnancy are group models of prenatal care and smoking cessation programs. Unfortunately, the U.S. also has a widespread overuse of Cesarean sections and scheduled inductions. The overuse of these practices, which are beneficial only in limited situations, has been associated with complications that jeopardize the health of mother and baby and with longer hospital stays and multiple costly procedures.

These tragically poor childbirth outcomes and high costs must no longer be tolerated in our country. Therefore, this week I am introducing the Maximizing Optimal Maternity Services for the 21st Century Act, better known as the MOMS Act. This bill will create a coordinating committee to ensure that Federal agencies are on the same page in promoting the best evidence-based maternity practices in their programs. And it will facilitate across maternity professions collaboration in the education of a diverse maternity care workforce. In addition, the MOMS Act authorizes grant programs for professional organizations to recruit and retain minority maternity care providers.

The MOMS Act also establishes an online database to make available the best evidence-based maternity care information to women and families, and it authorizes a consumer education campaign focused on how to achieve the healthiest maternity outcomes.

The MOMS for the 21st Century Act further expands research on the best maternity practices and on the identification of the geographic areas that lack adequate maternity health care providers.

Mr. Speaker, we can and must do better for our mothers and newborns. As a country, we must reach beyond our self-imposed boundaries and embrace a cost-effective, evidence-based model of maternity care that reflects our values and saves the lives of mothers and babies.

I urge my colleagues to join me in this effort by cosponsoring and helping to pass the MOMS for the 21st Century Act.

HEALTH CARE

The SPEAKER pro tempore. The Chair recognizes the gentleman from Colorado (Mr. TIPTON) for 5 minutes.

Mr. TIPTON. Mr. Speaker, there are probably very few issues that touch Americans, families, our States, and small businesses more personally than health care.

This House has dealt numerous times with addressing the Affordable Care Act. But when we talk about it on that very personal level—of a mom taking a sick child down to visit the doctor, to a senior citizen who's counting on that hospital being able to be there, to be able to deliver the care that they need—we need to recognize that the overarching view that Washington typically performs when passing a bill and delivering it to the American people, that it has very real consequences, very real impacts.

In my district in rural Colorado—and in fact throughout rural America—there is a looming health care crisis that is just on the horizon. That ability to be able to go to the doctor, to be able to have a hospital that's going to be there to be able to provide the service that's necessary—they're feeling that real impact right now at home.

We've had a lot of discussion about that big, overarching bill: the IPAB boards that are going to be making the medical choices for our senior citizens—indeed for all Americans—rather than that choice being made between the doctor and the patient; about the State mandates that are coming through; the Medicare payment cuts; higher health costs; the budget that is now going to be estimated at \$1.76 trillion in costs over a 10-year period, and rising, on a struggling American economy, on struggling families and small businesses; the 150 new boards that are being established; the better than 12,000 pages of new regulations that our hospitals, our doctors, and our families are going to have to be dealing with; and the short form, to simply be able to fill out and be able to apply for the Affordable Care Act, 21 pages just to be able to get insurance.

We need, Mr. Speaker, to be talking about those real impacts, not from the 30,000-foot view, but on the ground at home.

I recently went to Delta Memorial Hospital in my district, a small community hospital that's proud of their service. In fact, they've had multiple surveys that went through and rated

their service among the best. They are now being challenged by the Affordable Care Act in terms of that health care delivery.

They have a program called the Recovery Audit Contracts conducted by individual companies that don't even have to have health care background, but they're going back in and reassessing costs. And they're having to pay back money now, money that they simply do not have.

We're seeing reimbursements to doctors drop at Delta Memorial Hospital, making it harder for the physicians to be able to deliver that service.

These are small hospitals. They don't have big HR departments; they're there for the health of the community. But they are seeing real challenges in being able to continue. In fact, in many of our rural hospitals, they're beginning to wonder if they're going to be able to continue to deliver that service.

□ 1040

I've talked to doctors in Delta, Montrose, Grand Junction, Pueblo, throughout my entire district, who are frustrated that they are now seeing their reimbursements—money that they need to have to be able to conduct their business—being cut by the Federal Government, the Federal Government determining what the value of that service is going to be and saying you can afford it. That's not real life.

What we are seeing now are senior citizens who just became senior citizens by the virtue of a birthday over the last few months, they cannot find a doctor who is willing to take Medicare, simply because they can no longer afford it.

We have a system, Mr. Speaker, that completely forgot the original premise that every American, I believe, can agree on. We need to have real reform, but we need to go back to that initial premise of affordability and accessibility. The Affordable Care Act fails on both levels.

We are seeing right now, in my home State of Colorado, estimates for individual insurance policies this year are going to go up an estimated 23 percent or more. Small businesses, who are trying to provide group insurance, are seeing their costs going up this year estimated better than 17 percent.

Have we achieved more affordability, as was promised? We have not.

When we are talking about that accessibility issue, when that senior citizen in Delta, Colorado, walks into a doctor's office and is told that they aren't accepting any new patients, are we achieving that accessibility? We are not.

Mr. Speaker, we need to go back to that original premise, because so many small businesses right now that would like to be able to deliver that service are feeling the impact. I have a friend who owns several small Pizza Huts throughout the West, and she is dealing with those additional costs that are hurting her business and her ability to

be able to deliver that real service for her employees.

We have a challenge in this country, Mr. Speaker, and it can and will be addressed if we will go back to that original premise of affordability and accessibility. The Affordable Care Act fails on both points.

Let's roll up our sleeves and get the job done for the American people.

RECESS

The SPEAKER pro tempore. Pursuant to clause 12(a) of rule I, the Chair declares the House in recess until noon today.

Accordingly (at 10 o'clock and 42 minutes a.m.), the House stood in recess.

□ 1200

AFTER RECESS

The recess having expired, the House was called to order by the Speaker at noon.

PRAYER

Pastor Mark Turner, South Valley Community Church, Gilroy, California, offered the following prayer:

Heavenly Father, what an incredible honor it must be for these men and women gathered in this Chamber today to represent the entire population of this country. I pray that they would not only feel the magnitude of this responsibility, but that You would give them the strength of character to carry out that responsibility in an honorable and Christ-like way.

I pray, too, for the guardians of freedom on duty today all around the globe, the men and women of our Armed Forces. May You sustain them and keep them safe. May we as a Nation never forget the tremendous sacrifice they have made on our behalf to ensure our freedom and democracy.

May it be upon these Members of this House that the lantern of hope and the light of liberty continue to burn bright in this land we call America.

Finally, Lord, it is with heavy hearts that we stand here today, each one of us assembled in this Chamber pray for the families in Oklahoma who have been affected by the devastating tornado that struck yesterday. Comfort those who have lost loved ones, strengthen rescue workers and emergency personnel, and may neighbor reach out to neighbor to assist in the healing and rebuilding process.

As the eyes of the world are upon the residents of Oklahoma, let them demonstrate dependence upon You and help them to display the resilience, the resolve, and the American spirit that made their State and this Nation so great.

We pray these things in Jesus' name. Amen.